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ABSTRACT

Designed to assist agency and university professionals in the organization of a program to prepare trainees for employment as speech pathology assistants, based on intensive clinical work with patients, this training guide is presented in the form of a suggested program outline of minimal knowledge and skill requirements to be obtained by the trainee. The nine teaching modules (each including training time, objectives, content outline, suggested activities, and suggested references) are titled: (1) Trainee Orientation, (2) Bases of Speech: Structure and Function, (3) Hearing, (4) Disorders, (5) Diagnosis Evaluation and Clinical Management Procedures, (6) Ethnic and Cultural Differences, (7) Exceptional Children and Adults, (8) Client Follow-up Procedures, and (9) Work Experience Training. A job description for a speech pathology assistant, suggestions on trainee qualifications, instructor's qualifications, and duration of training and programs are included along with a list of criteria for evaluating trainees and a brief glossary of professional terms and organizations. (WL)

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Speech Pathology Assistant

A Suggested Guide for a Manpower Training Program

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Division of Manpower Development and Training

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FOREWORD

At a time when numerous practitioners in the health field are concerned with the problems of manpower shortage and manpower maldistribution in various areas, it is only logical that positive action be taken to improve the clinician-client ratio currently existing in speech pathology. Unlike other professions, speech pathology heretofore has not formally developed different levels of needed supportive personnel. There is a tremendous need for well-trained speech pathology assistants to help the speech pathologist with the performance of a wide variety of duties.

This guide was prepared for professionals to use in the organization of training programs. The speech pathology assistant who has successfully completed, in an approved setting, both the prescribed instructional program and the work experience program will be qualified to compile case histories and other evaluative information, participate in various therapy programs, maintain liaison with clients and their families, participate in population screenings, and aid in the coordination of client activities.

It is hoped that this guide will help agency and university personnel to implement high-quality training programs for persons who wish to serve as supportive personnel in the field of speech pathology.

Howard A. Matthews
Director, Division Manpower
Development and Training

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INTRODUCTION

Purpose of the Guide

This training guide has been prepared to assist agency and university programs in the organization of a program to prepare trainees for employment as speech pathology assistants. The training of speech pathology assistants should be based on intensive clinical work with patients. The content and organization of this guide are intended for use by professional individuals who are familiar with clinical speech and hearing problems.

This training guide does not attempt to delineate instruction in every detail, but it is presented in the form of a suggested program outline. The sequence of topic presentation should be the result of the instructor's clinical experience. Instruction observation with active student participation is strongly encouraged. The guide outlines only minimal knowledge and skill requirements to be obtained by the trainee. Additional topics or broader exploration of suggested topics will vary according to the needs, background and interest of the trainee as well as the instructor's preference.

Speech Pathology Assistant: Job Description

The speech pathology assistant has basic knowledge about the anatomy and physiology of speech and hearing mechanisms. He may be employed in a variety of settings such as speech and hearing centers, public school programs, and regional health clinics.

The speech pathology assistant works under the supervision of a qualified speech pathologist performing the following duties:

1. Collection of diagnostic information
2. Implementation of therapy programs for disorders of articulation, voice, rate and rhythm and language
3. Maintenance of liaison with clients and their families
4. Participation in population screenings for detection and conversation programs
5. Coordination of client activities

The speech pathology assistant shall not make independent decisions regarding evaluations and management of clients. The assistant should not be assigned tasks for which he has not been specifically trained. He is able to handle medical records and work with the health related personnel. The speech pathology assistant is a person who has successfully completed the prescribed training program in an approved setting, followed by experience in an approved work environment.

Salaries depend largely on the type of employment facility, regional location and demand for services.

Trainee Qualifications

Trainees must possess a high school diploma or its equivalent and speech or language skills acceptable to the area. They should be able to work quickly, tactfully, carefully and display a high interest in working with people. They should be persons who adapt to problem situations easily and can work under close supervision. They must express a desire to render a service. It is expected that trainees meet the requirements of the State Health Department.

All other qualifications being equal, preference shall be given to veterans, the unemployed and underemployed.

Instructor Qualifications

The speech pathology assistant training program revolves around work experience with speech and language impaired clients. It is suggested that instructors for this program work actively in the provision of direct services to the speech and language population. Instructors need not necessarily hold certification in speech pathology. In fact, portions of the training may be better taught by medical personnel, psychologists and/or special education teachers. Instructors should be selected for their competency in the area of didactic responsibility, their ability to present the material in an intensive, yet meaningful manner, and their genuine interest in instructing speech pathology assistant trainees.

It is required, however, that supervision of the trainees' practicum be the responsibility of speech pathologists who meet the academic and work experience standards established by the American Speech and Hearing Association for the Certificate of Clinical Competence in Speech Pathology or persons holding valid credentials attesting to their clinical competency.

Suggestions for the Organization of Intensive Instruction

The instructional program should make maximum use of teaching through experience as well as visual aids, models, and field trips. It should be noted that this suggested program guide is not strongly academic. The intent is that the trainee learn procedures through planned, intensive experience with actual patients under close supervision.

The allocation of clock hours per teaching module indicated the relative emphasis on each subject. Changes in this distribution of instruction time may be necessary, depending on the ability and background of the trainees and the particular requirements of local employment opportunities. The proportion of academic instruction to work experience represents a necessary minimal ratio. Sufficient time should exist both during the training period and the work experience period to permit additional instruction for the development of knowledge and experience in related skills and techniques which may be useful.

Within this guide, the teaching modules are shown separately. However, in planning the program, every effort should be made to bring about maximum integration of the material between lectures, clinical testing situations, anatomical models, films, and other instructional media.

Duration of Training and Program

The program is divided into two phases. The initial phase is designed as an intensive two-month program of didactics integrated with clinical and/or laboratory exercises. Upon completion of the intensive training period, the trainee must display a capability of performing the module objectives under supervision. During the two months of intensive training, the instructors and responsible supervisors are to secure as much information as possible about the trainee. This information will aid the instructors and supervisors in planning daily lessons and the second phase of training.

Each trainee is to be assessed for strengths and weaknesses before entering the second phase. A written test may or may not be administered. Those entering the program presenting evidence of at least 200 hours of experience directly related to speech pathology may have the initial two-month intensive training period waived by the training facility faculty upon demonstrated proficiency.

The second phase of training for the speech pathology assistant trainee is two months of work experience. The work experience assignment is to be the responsibility of the training facility. The work experience setting, however, may include any facility where speech pathology assistants may be employed.

During the two-month work experience period, the training facility retains supervisory responsibility for the trainee. That is, the training facility must provide direction and critical evaluation of the trainee's work. Monthly summaries of the trainee's work experience and supervisor evaluations will be filed on standard forms with the National Association for Hearing and Speech Action. Because of the brief training period and the fact that the trainee so quickly enters the field of health service, more supervision is needed than is true of standard academic programs.

PROGRAM IMPLEMENTATION

Course Preparation

It is recognized that different professional settings and speech clinics will utilize the suggested program format differently, and it is understood that the training program will recognize and allow for such differences. The best presentation is, of course, one that has been thoroughly prepared by the instructor and based on his own experience and manner of teaching. Although instructors will differ in their ways of organizing and coordinating their presentations, it is agreed that the purpose of a lesson is effective and meaningful instruction.

Written plans may be brief, but the good instructor will note the following before the class starts:

1. The goals or objectives of the lesson
2. The outline and suggested time schedule for the lesson, including:
    a. An interesting approach to introduce the lesson
    b. Instruction which will help the trainees discover new facts and principles, solve realistic problems, and practice new skills
    c. A way to summarize the lesson, thereby helping the trainee arrive at some valid conclusions
3. The teaching materials and references to be used

TEACHING MODULE I

Trainee Orientation

Training Time:

Didatic, 14 hours; Laboratory, 25 hours

Objectives:

- To introduce the trainee to the nature and scope of the program and to its relationship to speech pathology
- To provide the trainee with an understanding of the functions of the speech pathology assistant
- To define for the trainee the extent and limits of his duties and his responsibility to his patients and to his supervisor
- To present an understanding of the purposes, roles, duties, and responsibilities of the speech pathology assistant and the speech pathologist
- To develop self-concepts

Module Outline:

A. Program Orientation

1. Program objectives
2. Length of program
3. Daily schedule
4. Standards of performance
5. Clinic exercises and outside readings
6. Work experience

B. Vocational Opportunities

1. Employment settings
2. Vertical advancement
3. Horizontal mobility
4. Advanced training
5. Economics

C. Dynamics of Employment

1. Ethical obligations
2. Supervisory authority and responsibility
3. Personal relations

4. Structural hierarchy
5. Scope of the speech pathology assistant's function
6. Rationale for training speech pathology assistants

D. Speech Pathology Assistant

1. Code of Ethics – responsibilities and rules governing professional behavior and protecting confidential information
2. Client contact
3. Case history
4. Diagnoses
5. Management
6. Referrals
7. Follow-up
8. Personal hygiene
9. Conduct on job

E. Speech Pathologist

1. Educational requirements
2. Professional role
3. Responsibility to client
4. Role in comprehensive health and education programs

F. Review

1. Acceptable speech for area
2. Roles of speech pathologists and assistant
3. Code of ethics
4. Costs of services and economics of the clinic

Suggested Activities:

1. Tour the training facilities and meet the professional and administrative staffs

2. Visit various speech clinics in addition to the training institution

3. Observe speech pathologists working

Suggested References:

1. Daniel R. Boone, "Professional Responsibilities and Code of Ethics," *The Utilization of Supportive Personnel in Speech Correction in the Public Schools* (Jerome G. Alpiner, Project Director, Title VI), University of Denver; Denver, Colo., 1968.

2. Commission on Accreditation of Rehabilitation Facilities, *Standards Manual for Rehabilitation Facilities*, Chicago, Ill., 1973.

3. Richard E. Hamm (Editor), *Training and Utilization of Supportive Personnel for Speech Therapy in the Public Schools*, Athens, Ohio, 1968.

MAJOR DIVISIONS OF TRAINING PROGRAM

Title	Suggested Clock Hours	
	Didactic	Laboratory
	Initial Phase	
Trainee Orientation	14	25
The Bases of Speech: Structure and Function of Speech Mechanism; Language Development; Phonetics and Phonemics	26	50
Hearing	4	10
Disorders	37	60
Diagnosis Evaluation and Clinical Management Procedures	6	50
Ethnic and Cultural Differences	4	15
Exceptional Children and Adults	6	25
Client Follow-up Procedures	3	15
	100 hours	250 hours
	Secondary Phase	
Work Experience	0	2 Months

TEACHING MODULE II

The Bases of Speech: Structure and Function of Speech Mechanism, Language Development, Phonetics and Phonemics

II-A Structure and Function of Speech Mechanism

Training Time:

Didactic, 26 hours; laboratory, 20 hours

Objective:

- To teach the trainee the basic structure and function of the speech and hearing mechanisms

Module Outline:

A. Structure and Function of the Mouth

1. Lips, teeth, lower jaw
2. Tongue
3. Teeth ridge, hard and soft palates

B. Structure and Function of the Central Nervous System

1. Brain
2. Spinal cord
3. Nerves - afferent, efferent

C. Structure and Function of the Nose, Throat, and Vocal Cords

D. Breathing for Adapted Speech

1. Normal breathing
2. Modified exhalation for speech

E. Structure and Function of the Ear

1. Outer ear
2. Middle ear
3. Inner ear, labyrinth and nerve supply, temporal lobe of brain

Suggested Activities:

1. Study structural models of head to visualize anatomical structures

2. Make drawings of major anatomical structures

3. Describe anatomical relationships

4. Participate in examination of clients who have various speech malfunctions due to anatomical distortions

Suggested Reference Sources for Instruction:

1. Charts and/or models of respiration, phonation, and articulation mechanisms

2. Schematic drawings

3. Films of speech mechanism in action

4. Dental costs of bite anomalies, cleft, etc.

5. Exploration of speech mechanism in students and instructor if feasible

6. Pictures of normal and abnormal speech mechanisms

7. Sawyer stereo view atlas of human anatomy

8. Film on the central nervous system

Suggested References:

1. Boyd V. Sheets, *Anatomy and Physiology of the Speech Mechanism*, Bobbs-Merrill, Indianapolis, Ind., 1971.

2. Willard R. Zemlin, *Speech and Hearing Science: Anatomy and Physiology*, Prentice-Hall, Inc., Englewood Cliffs, N. J., 1968.

TEACHING MODULE II

The Bases of Speech: Structure and Function of Speech Mechanism; Language Development; Phonetics and Phonemics

II-B Language Development

Training Time:

Didactic, 12 hours; laboratory, 15 hours

Objectives:

- To introduce the trainee to the normal process of speech and language acquisition
- To familiarize the trainee with the components of language
- To introduce the trainee to the characteristics of language

Module Outline:

A. Language Development

1. Pre-linguistic–reflexive vocalization, babbling, lalling, echolalia
2. True speech–holophrases
3. Primitive grammar
4. Transformations–plurals, possessives, negation, questions
5. Embedding–adjectives, etc.

B. Components of Language

1. Phonology
2. Morphology
3. Syntax
4. Semantics

C. Characteristics of Language

1. Fixed developmental scale
2. Species specific
3. Within capabilities of the person

Suggested Activities:

1. Visit to a day care center, Head Start schools

2. Tape recordings that show stages of language development in children

Suggested Reference:

1. Eric Lenneberg, *Biological Foundations of Language*, John Wiley & Sons, New York, 1967.

TEACHING MODULE II

The Bases of Speech: Structure and Function of Speech Mechanism, Language Development, Phonetics and Phonemics

II-C Phonetics and Phonemics

Training Time:

Didactic, 8 hours; laboratory, 15 hours

Objectives:

- To instruct the trainee in the fundamentals of phonetic transcription
- To provide the trainee with an understanding of the production of normal and deviant phonemes
- To improve the listening skills of the trainee

Module Outline:

A. Definitions

B. Concept of Phonology as Part of Oral Language

C. Description of Vowels, Dipthongs, Consonants, Blends

1. Phonetic symbols for speech sounds
2. Description of common phonemes
3. Phonemes in actual speech and in combination with other phonemes

Suggested Reference Sources for Instruction:

1. Tape-recorded instructional materials for identification of phonemes
2. Charts for showing modes of articulation, placement, etc.
3. Materials for practice in phonetic transcription
4. Tapes of clients demonstrating substitutions, distortion, and omissions as recorded phonetically
5. Common articulation tests that employ phonemes in their inventory
6. Examination of speech mechanism by students under supervision of instructor
7. X-ray movie of phonetic placement

Suggested References:

1. P. B. Denes and E. N. Pinson, *The Speech Chain,* Bell Telephone Laboratory, Murray Hill, N. J., 1963.

2. Eugene McDonald, *Articulation Testing and Treatment: A Sensory Motor Approach,* Stanwix House, Pittsburgh, Pa., 1964.

3. Claude M. Wise, *Applied Phonetics,* Prentice-Hall, Englewood Cliffs, N. J. 1960.

TEACHING MODULE III

Hearing

Training Time:

Didactic, 4 hours; laboratory, 10 hours.

Objectives:

- To teach the trainee the relationship between hearing and the speech and language processes
- To specify for the trainee those disorders of speech and language attributable to hearing impairment
- To acquaint the trainee with types of hearing impairment encountered in children and adults
- To acquaint the trainee with the rudiments of hearing assessment (screening procedures, threshold and suprathreshold tests–pure tone, speech)

Module Outline:

A. Hearing as Related to Speech and Language

B. Physical Relationships of Speech and Language to the Hearing Mechanism, Including "Feedback"

   1. Relationship of loudness to intensity and of pitch to frequency
   2. Temporal relations in audition

C. Disorders of Speech and Language Attributable to Hearing Impairment

Suggested Activities:

1. Recordings demonstrating types of hearing impairment and effects upon speech and language learning–conductive and/or sensorineural hearing loss
2. Auditory training–lipreading, speechreading, manual communication, total communication, levels of hearing loss
3. Pure tone and speech audiometry
4. Types of hearing tests (pure tone, speech)–screening at fixed levels, suprathreshold tests (discrimination), threshold tests, special tests (pure tone, speech, impedance audiometry)
5. Use of sound rooms

Suggested References:

1. *Texts:*

   a. H. Davis and S. R. Silverman, *Hearing & Deafness* (3rd Ed.), Holt Rhinehart, New York, 1970.

   b. H. A. Newby, *Audiology: Principles and Practice* (2nd Ed.), Appleton-Century-Crofts, Inc., New York, 1964.

   c. D. A. Sanders, *Aural Rehabilitation,* Prentice-Hall, Englewood Cliffs, N. J., 1971.

2. *Disc record:*

   a. *How They Hear,* Gordon Stowe & Assoc., P. O. Box 233, Northbrook, Ill.

3. *Pamphlets* (free):

   a. R. Naunton, *Introduction to Audiometry* (3rd Ed.), Maico Hearing Instruments, Minneapolis, Minn., 1972.

   b. *Industrial Noise & Hearing Loss* (Rev. Ed.), Maico Hearing Instruments, Minneapolis, Minn.

   c. *Hearing Aids & Their Components,* Zenith Hearing Aid Sales Corp., Chicago, Ill.

4. *Pamphlet* (minimum cost):

   a. *Facts About Hearing Aids,* Council of Better Business Bureaus, Inc., Washington, D. C., 1973.

TEACHING MODULE IV

Disorders

IV-A Disorders of Articulation

Training Time:

Didactic, 13 hours; laboratory, 20 hours

Objectives:

- To enable the trainee to identify articulation defects and understand possible causes for them
- To explain to the trainee the process of evaluation and therapy for articulation defects

Module Outline:

A. Clinical Overview

1. Definition of articulation
2. Definition of articulation defect
3. Types of articulation defects–omissions, substitutions, distortion

B. Sound Development Norms–Development of the Phonological System According to Age Norms

C. Causes of Articulation Defects

1. "Functional vs. organic"
2. "Emotional"

D. Evaluation Procedures

1. Selection of tests

   (a) Screening
   (b) Diagnostic
   (c) Deep testing (McDonald)

2. Administration of tests
3. Recording of test responses
4. Scoring of test responses

E. Suggestions for Therapy Procedures

1. Principles of behavior modification
2. Individual and group therapy
3. Criteria for sound selection
4. Construction of lesson plans
5. Materials and instrumentation
6. Measuring progress (recording responses)
7. Home assignments

F. Criteria for Dismissal or Termination

Suggested Activities:

1. Observation of evaluation and therapy procedures

2. On-site demonstration therapy

3. Film: *The Ohio State Test for Identifying Misarticulation, Form A and B.*

Suggested Reference:

1. Charles Van Riper, *Speech Correction* (4th Ed., Chapters 9 and 10), Prentice-Hall, Englewood Cliffs, N. J., 1963.

TEACHING MODULE IV

Disorders

IV-B Disorders of Language

Training Time:

Didactic, 12 hours; laboratory, 20 hours

Objectives:

- To help the trainee identify language disorders and to familiarize him or her with possible causes for them
- To introduce the trainee to medical syndromes that entail language disturbance
- To familiarize the trainee with behavior modification techniques used in language disturbance therapy
- To introduce the trainee to common approaches used in language rehabilitation
- To make the trainee sensitive to associated handicaps that clients may exhibit

Module Outline:

A. Possible Causes of Language Disorders in Children

1. Developmental delay
2. Environmental
3. Hearing
4. Mental retardation
5. Other causes

B. Possible Causes of Language Disorders in Adults

C. Syndromes in Children

D. Syndromes in Adults

E. Behavior Manifestation

1. Hyperactive
2. Hypoactive
3. Attention
4. Perception
5. Laterality
6. Direction
7. Etc.

F. Behavior Manifestations in Adults

1. Emotional lability
2. Perservation
3. Etc.

G. Approaches

1. Developmental language assessment
2. Mean-length-of-utterance
3. Cognitive basis
4. Dialectal basis
5. Etc.

Suggested Activities:

1. Visual and auditory display of syndromes
2. Visits to cerebral palsy clinics, Veteran's Administration hospitals, and other hospitals
3. Videotape of client/therapist relationship
4. Videotape of behavior manifestations

Suggested References:

1. M. F. Berry, *Language Disorders of Children,* Appleton-Century-Crofts, Inc., New York, 1969.
2. J. V. Irwin and M. Marge, *Principles of Childhood Language Disabilities,* Appleton-Century-Crofts, Inc., New York, 1972
3. N. E. Wood, *Delayed Speech and Language Development,* The Foundations of Speech Pathology Series, Prentice-Hall, Englewood Cliffs, N. J., 1971.

TEACHING MODULE IV

Disorders

IV-C Stuttering

Training Time:

Didactic, 6 hours; laboratory, 10 hours

Objectives:

- To help the trainee identify stuttering behavior
- To help the trainee understand some possible causes for the stutterer's behavior
- To demonstrate for the trainee approaches to evaluation and therapy

Module Outline:

A. Clinical Overview

1. Definition of stuttering
2. Identification of stuttering behavior

   (a) Levels of severity
   (b) Nucleus behaviors
   (c) Interfering behaviors
   (d) Incidence
   (e) Sex ratio

3. Difference between stuttering and normal disfluency

B. Theories about Causes of Stuttering

1. Neurotic
2. Learning
3. Organic
4. Multi-causative

C. Evaluation Procedures Through Controlled and Systematic Observation

1. Selection of tests to be administered
2. Interview and case history
3. Administration of tests
4. Recording responses
5. Scoring of test responses

D. Suggestions for Therapy

1. Individual and parent counseling
2. Principles of behavior modification
3. Individual and group therapy activities
4. Lesson planning
5. Selection of materials and instrumentation for therapy
6. Measuring progress in therapy
7. Home assignment

E. Criteria for dismissal or termination

Suggested Activities:

1. Lectures, demonstrations, and observation of evaluation procedures and therapy

2. Use of visual aids

3. Films:

   a. *Identifying Speech Disorders: Stuttering;* order from Syracuse University Film Library, Syracuse, New York; $7.50 fee.

   b. *Analysis of Stuttering Behavior;* order from Dr. William Leith, Department of Speech Communication, Case Western Reserve University, Cleveland, Ohio; $20.00 fee.

   Both films train people to identify stuttering in children and adults.

Suggested References:

1. M. F. Berry and J. Eisenson, *Speech Disorders,* Appleton-Century-Crofts, Inc., New York, 1956.

2. Oliver Bloodstein, *A Handbook on Stuttering,* National Easter Seal Society, Chicago, Ill., 1969.

3. B. Bryngelson and D. Chapman, *Know Yourself: A Workbook for Those Who Stutter,* Burgess, Minneapolis, Minn., 1950.

4. Jon Eisenson, *Stuttering: A Symposium,* Harper and Row, New York, 1958.

5. Israel Goldiamond, "Stuttering and Fluency as Manipulatable Operant Response Classes," *Operant Procedures in Remedial Speech and Language* (Sloane and MacAuley, Eds.), Houghton-Mifflin, New York, 1968.

6. Hugo Gregory, *Stuttering: Differential Evaluation and Therapy,* Bobbs-Merrill, Indianapolis, Ind., 1973.

7. Wendell Johnson, *People in Quandaries,* Harper and Row, New York, 1946.

8. W. Johnson, J. Darley, and D. C. Spriestersbach, *Diagnostic Methods in Speech Pathology*, Harper and Row, New York, 1963.

9. H. Luper and R. Mulder, *Stuttering: Therapy for Children*, Prentice-Hall, Englewood Cliffs, N. J., 1964.

10. Charles Van Riper, *The Nature of Stuttering*, Prentice-Hall, Englewood Cliffs, N. J., 1971.

11. Dean Williams, "Stuttering Therapy for Children," *Handbook of Speech Pathology* (L. Travis, Ed.), Appleton-Century-Crofts, Inc., New York, 1971.

12. Gertrude Wyatt, *Language Learning and Communication Disorders in Children*, Free Press, New York, 1969.

TEACHING MODULE IV

Disorders

IV-D Voice Disorders

Training Time:

Didactic, 6 hours; laboratory, 10 hours

Objectives:

- To help the trainee identify the parameters of good voice
- To familiarize the trainee with common voice disorders and some possible causes for them
- To demonstrate for the trainee approaches to evaluation and therapy

Module Outline:

A. Characteristics of Good Voice–Resonance, Pitch, Intensity, Prosody

B. Common Types of Voice Disorders and Their Causes

C. Evaluation Procedures and Therapy Processing

Suggested Activities:

1. Identification of voice characteristics that are pleasing and displeasing to the trainee (sample population of at least ten people)
2. Lecture demonstration of therapy sessions with voice cases
3. Common causes of voice disorders–vocal use, vocal abuse

Suggested Activities:

1. D. R. Boone, *The Voice and Voice Therapy*, Prentice-Hall, Englewood Cliffs, N. J., 1971.
2. G. P. Moore, *Organic Voice Disorders*, Foundations of Speech Pathology Series, Prentice-Hall, Englewood Cliffs, N. J., 1971.
3. A. T. Murphy, *Functional Voice Disorders*, Foundations of Speech Pathology Series, Prentice-Hall, Englewood Cliffs, N. J., 1971.

TEACHING MODULE V

Diagnosis Evaluation and Clinical Management Procedures

Training Time:

Didactic, 6 hours; laboratory, 50 hours

Objectives:

- To demonstrate for the trainee how a speech pathologist reaches a decision about the nature and extent of deviant speech and language abilities
- To demonstrate for the trainee how a speech pathologist establishes a behavioral base for communicative functioning
- To demonstrate for the trainee how a speech pathologist determines and develops a therapeutic program

Module Outline:

A. The Diagnostic Procedure

1. Preliminary background information
2. Case history
3. Pertinent information from health-related disciplines
4. Tests--speech and language, audiological, psychological
5. Parent or client interview

B. Formal and Informal Test Procedures

1. Hearing
2. Articulation
3. Psycholinguistic abilities
4. Psychomotor abilities
5. Psychological development, emotional maturity
6. Voice
7. Intonation, rhythm, stress patterns

C. Clinical Observation

1. Physical appearance, developmental characteristics
2. Motor coordination
3. Motor strength and efficiency
4. Perceptual-motor integration

D. Observation of Client's Behavior

1. Separation anxiety
2. Adaptability
3. Concentration on task
4. Conditioning capacity
5. Methods of task attack
6. Reactions to frustrations and failure

E. Data Recording

F. Evaluation of Diagnostic Data

1. Reliability factors
2. Validity factors

G. The Clinical Diagnostic Opinion

1. Factors in decision-making
2. Implications of decision

H. Reporting Techniques and Responsibilities

Suggested Activities:

1. Practice in screening a normal population

2. Practice in collecting data relevant to diagnosis with group discussion and follow-up afterward

3. Observation of testing procedures followed by practice, under supervision, in giving tests to other trainees

4. Practice in scoring selected tests

5. Practice in assembling diagnostic materials and preparing equipment for an evaluation

6. Practice in conditioning patients for diagnostic evaluation sessions, followed by supervisory feedback

7. Review and discussion of example cases

TEACHING MODULE VI

Ethnic and Cultural Differences

***Training Time:**

Didactic, 4 hours; laboratory, 15 hours

Objectives:

- To give the trainee insight into ethnic and cultural differences in speech and language
- To help the trainee discriminate between such a difference and a speech disorder

Module Outline:

A. Language Usage

1. Difference between speech disorders and ethnic patterns
2. Body language

B. Cultural Attitudes

C. Sociopolitical Aspects

D. Socioeconomic Problems

E. Health Problems

F. Value Systems

G. Celebration of Special Events

H. Peer Relationships

I. Religious Preferences

J. Reactions of Others to these Sociocultural Factors

Suggested Activities:

1. Visits to communities where clients live
2. Attendance at a social, religious, or educational function in the area
3. Observation in the school system

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*Training time and emphasis should be adjusted to meet regional needs.

4. Observation in a Head Start program

5. Observation of a parent-child interaction

TEACHING MODULE VII

Exceptional Children and Adults

***Training Time:**

Didactic, 6 hours; laboratory, 25 hours

Note: Centers emphasizing special language and communication disorders may wish to concentrate additional training in specific areas

Objective:

To offer the trainee an overview of the limitations and capabilities of exceptional children and adults

Module Outline:

A. Definition of "exceptionality" and "normality"

B. Disabilities and their effect on

1. Motor skills
2. Language development
3. Speech
4. Hearing

C. Diseases and their effect on

1. Language development
2. Speech
3. Hearing

Suggested Activities:

Field trips to:

1. Residential facilities for the multihandicapped
2. Training center for the mentally retarded
3. Adult aphasic unit of hospital or nursing home
4. Laryngectomy clinic
5. Day care center
6. Head Start program

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*Training time and emphasis should be adjusted to meet regional needs and the planned placement of the trainees. The elements of this module may be incorporated elsewhere in the training program.

TEACHING MODULE VIII

Client Follow-up Procedures

Training Time:

Didactic, 3 hours; laboratory, 15 hours

Objectives:

- To give the trainee insight into reasons for client response and failure to respond
- To give the trainee insight into why clients do not keep appointments

Module Outline:

A. Client-related factors

1. Economic
2. Transportation
3. Frustration, failure (self-concept)

B. Clinician-related factors

1. Inappropriate lesson-planning
2. Inadequate explanation of goals
3. Inadequate case management

C. Client-clinician-related factors

Suggested Activities:

1. Interviews with clients or parents at home, in school, or at work to determine why appointments were not kept or program was terminated by client or parent
2. Review of closed cases and visits to clients to ascertain final outcomes
3. Demonstration of how feedback information is used to adjust the client's program and/or future objectives
4. Development of an evaluation instrument that can be used to assess client-clinician problem areas

TEACHING MODULE IX

Work Experience Training

Training Time:

Laboratory, 2 months

Objectives:

- To develop the trainee's knowledge and skill in assisting with diagnosis and therapy of the communicatively handicapped
- To provide the trainee with a variety of work experience that may enhance his or her employment possibilities
- To encourage the trainee to seek advanced or specialized training

CRITERIA FOR EVALUATING TRAINEE'S READINESS FOR EMPLOYMENT

Technical performance is the primary criterion for determining whether the trainee is ready for employment. However, the trainee's understanding and insight into how to provide his newly acquired skills and services are of such importance that every attempt must be made to evaluate trainee progress in this area as well.

The speech pathology assistant trainee must demonstrate proficiency in the didactic phase before entering into the work training phase. Devices selected by the training facility may be utilized at any time to enable the instructor and the trainee to evaluate the trainee's progress. In addition to the trainee's fundamental knowledge of the subject matter and his competent testing abilities, successful completion of the training program will not be recognized without a written recommendation of the training facility. A speech pathology assistant diploma will be issued by the National Association For Hearing and Speech Action upon the trainee's completion of requirements and the recommendation of the training facility.

The following kinds of personal qualities, work habits, and competencies of the trainee are important to develop or strengthen during the training and apprenticeship program:

1. Courtesy and tact in dealing with supervisors, professional people, and the general public
2. Acceptable appearance through cleanliness, neatness, and sensible choice of clothing
3. Cooperative attitude toward work
4. Understanding of his own role and the roles of others
5. Demonstration of ability to work with or without immediate supervision
6. Demonstration of ability to develop and follow a work plan or schedule
7. Demonstration of techniques and methods of keeping equipment and working facilities orderly and in good condition
8. Punctuality in all aspects of work
9. Ability to take constructive criticism and make appropriate behavioral changes

BRIEF GLOSSARY OF PROFESSIONAL TERMS AND ORGANIZATIONS

1. American Speech and Hearing Association (ASHA)–a professional organization composed of audiologists and speech pathologists. Its purposes are to encourage basic scientific study of the processes of human communication with special reference to speech, hearing, and language disorders and to foster improvement of clinical procedures relevant to these disorders. ASHA is located at 9030 Old Georgetown Road, Washington, D. C. 20014.

2. Audiologist–a professional person holding at least a master's degree or the equivalent in the specialty of audiology. An audiologist's usual functions are clinical diagnosis, counseling, and therapy for hearing-impaired patients. Audiologists may also be involved in teaching, research, supervision, and administration.

3. Audiology–the study of hearing and hearing disorders. It originally evolved from the fields of speech pathology and otology, hence its concern is with both the medical and the communicative aspects of human hearing.

4. Natinal Association For Hearing and Speech Action (NAHSA)–formerly the National Association of Hearing and Speech Agencies, an organization whose members are community service agencies and lay and professional people who are interested in and work with communicatively handicapped persons. Its primary concern is to encourage the delivery of quality services to communicatively handicapped people through field work, training, and dissemination of information. NAHSA is located at 814 Thayer Avenue, Silver Spring, Maryland 20910.

5. Speech pathologist–a professional person who has studied development and disorders of human communication and who is primarily involved in diagnosis and therapy of speech disorders.

6. Speech pathology–the study of speech and speech disorders. It evolved from the fields of medicine and psychology. Strong emphasis is placed on knowledge of these areas in the study of communication disorders.

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